Department of Veterans Affairs Veterans Health Administration Washington, DC 20420 VHA HANDBOOK 1601D.02 Transmittal Sheet August 7, 2006

TREATMENT OF ALLIED AND FOREIGN NATIONAL BENEFICIARIES

- **1. REASON FOR ISSUE.** This Veterans Health Administration (VHA) Handbook updates Department of Veterans Affairs (VA) procedures for providing information regarding provision of medical care to allied and foreign national beneficiaries in VHA health care facilities.
- **2. SUMMARY OF CHANGES.** This VHA Handbook updates current procedures.
- **3. RELATED ISSUES.** VHA Handbooks 1601A.01 through 1601E.01.
- **4. RESPONSIBLE OFFICE.** The Chief Business Office (16) is responsible for the contents of this VHA Handbook. Questions may be addressed to 202-254-0406.
- **5. RECISSIONS.** VHA Manual M-1, Part I, Medical Administration Activities, Chapter 24, is rescinded.
- **6. RECERTIFICATION:** This VHA Handbook is scheduled for recertification on or before the last working day of August 2011.

Jonathan B. Perlin, MD, PhD, MSHA, FACP Under Secretary for Health

DISTRIBUTION: CO: E-mailed 8/8/06

FLD: VISN, MA, DO, OC, OCRO, and 200 – E-mailed 8/8/06

CONTENTS

TREATMENT OF ALLIED AND FOREIGN NATIONAL BENEFICIARIES

PARAGRAPH	
1. Purpose	1
2. Authority	1
3. Definitions	1
4. Scope	2
5. Eligibility and Provision of Services for Allied Ben than Czechoslovakian and Polish Veterans and w of a War Pension from Great Britain	ho are not in Receipt
6. Eligibility and Provision of Services for Czech Rep Polish Beneficiaries	
7. Eligibility and Provision of Services for Foreign Na	ational Beneficiaries 6
8. Death Benefits of Allied and Foreign National Benefits	eficiaries 6
9. Billing and Collections for Allied and Foreign Nati	onal Beneficiaries 6

TREATMENT OF ALLIED AND FOREIGN NATIONAL BENEFICIARIES

1. PURPOSE

This Veterans Health Administration (VHA) Handbook provides information on the policies for providing Department of Veterans Affairs (VA) health care benefits to beneficiaries of foreign countries.

2. AUTHORITY

Allied Beneficiaries are certain beneficiaries of foreign countries that are eligible for treatment within the VA Health Care System. The following table provides authority references for specific allied and Foreign National Beneficiaries.

	Beneficiary Type(s)	Authority(ies)
a.	Allied Beneficiaries	(1) Title 38 Code of Federal Regulations (CFR), Sections - 17.41(e) - 17.42 - 17.43(a)(3) - 17.94 - 17.102(d), and - 17.143(n), and (2) Title 38 United States Code (U.S.C.), Section 109 (a)(1-3).
b.	Beneficiaries from Armed Forces of the Government of Czechoslovakia, and Poland	(1) <u>38CFR§17</u> , (2) <u>38 U.S.C. §17</u> , and (3) <u>38 U.S.C. §109 (c)(1-2)</u> .
c.	Foreign national beneficiaries	22 U.S.C. §2357.

3. DEFINITIONS

a. <u>Allied Beneficiaries.</u> Allied beneficiaries are former members of the armed forces of nations allied with the United States (U.S.) in World War 1 (except any nation which was an enemy of the United States during World War II) and World War II.

- b. <u>Czechoslovakian or Polish Beneficiaries</u>. <u>Czechoslovakian or Polish Beneficiaries</u> are former members of the armed forces of the Government of Czechoslovakia or Poland who:
- (1) Served during World War I (WWI) or World War II (WWII) in armed conflict with an enemy of the United States (U.S.),
 - (2) Subsequently served in or with the armed forces of France or Great Britain, and
 - (3) Have been citizens of the U.S. for at least 10 years.
- c. <u>Foreign Nationals.</u> Foreign nationals are veterans of nations that were not allied with the U.S. during WWI and WWII.

4. SCOPE

This VHA Handbook provides details on the:

- a. Eligibility and provision of services for:
- (1) Allied beneficiaries,
- (2) Former members of the armed forces of the Government of Czechoslovakia and the Government of Poland beneficiaries,
 - (3) Foreign National Beneficiaries, and
 - b. Death benefits of Allied and Foreign National Beneficiaries.
- 5. ELIGIBILITY AND PROVISION OF SERVICES FOR ALLIED BENEFICIARIES OTHER THAN CZECHOSLOVAKIAN AND POLISH VETERANS AND WHO ARE NOT IN RECEIPT OF A WAR PENSION FROM GREAT BRITAIN
- a. <u>Provision of Services to Allied Beneficiaries.</u> VA provides medical services to beneficiaries of those nations allied with the U.S. in World War 1 and World War II (except any nation which was an enemy of the U.S. during World War II). Such beneficiaries:
- (1) Must be registered in Veterans Information Systems and Technology Architecture (VistA),
 - (2) Will not be enrolled in the VA health care system, and
 - (3) Will not receive a Veterans Identification Card (VIC).
- b. <u>Eligibility Requirements for Allied Beneficiaries</u>. Allied beneficiaries must meet the following eligibility requirements in order to receive VA health care benefits:

- (1) The government of the requesting nation must:
- (a) Have a reciprocal agreement with VA,
- (b) Submit proper authorization for services to be provided, and
- (c) Provide a written agreement to reimburse for services provided, and
- (2) The beneficiary must be living in the U.S.

NOTE: For information on obtaining authorization for services provided to allied beneficiaries, see VHA.PG.1601D.02.2.3 (for internal VHA use only).

c. <u>Outpatient Medical Treatment for Allied Beneficiaries.</u> Outpatient treatment is furnished to eligible allied beneficiaries at a VA health care facility or on a fee basis as determined by the Clinic Director, or designee.

(1) **Emergent Outpatient Treatment**

- (a) Emergency outpatient treatment can be provided to allied beneficiaries at a VA health care facility even though the facility may <u>not</u> have authorization at the time services are provided.
- (b) If it is later determined that the allied beneficiary was <u>not</u> eligible for the outpatient treatment provided on an emergent basis; the facility can provide no further treatment except when the care is authorized. The allied beneficiary is to be billed at the humanitarian emergency rate for services provided. *NOTE:* For humanitarian emergency rates, refer to present VHA policy (cost-based and inter-agency billing rates).
- (c) Allied beneficiaries who receive emergency outpatient care from a non-VA facility without prior VA authorization must send any billing directly to their appropriate veteran's agency. VA cannot pay or bill for such care on behalf of the beneficiary.
- (2) <u>Non-Emergent Outpatient Treatment.</u> An allied beneficiary found to be in need of non-emergent outpatient treatment may <u>not</u> be treated <u>until</u> the allied government provides authorization for such services.
- d. <u>Inpatient Medical Treatment for Allied Beneficiaries</u>. Hospitalization is furnished to eligible allied beneficiaries in the nearest appropriate VA health care facility. When a bed in a VA health care facility is not feasibly available, hospitalization in another Federal or non-Federal hospital may be authorized by the clinic of jurisdiction or VA medical facility exercising contract hospitalization authority in the area.

(1) Emergent Inpatient Treatment for Allied Beneficiaries

(a) Emergency inpatient treatment can be provided to allied beneficiaries in a VA health care facility even though the facility may <u>not</u> have authorization at the time services are provided.

- (b) If it is later determined that the allied beneficiary was <u>not</u> eligible for the inpatient treatment provided on an emergent basis, the patient may remain hospitalized <u>only</u> until transfer to a non-Federal hospital can be arranged. The allied beneficiary is to be billed at the humanitarian emergency rate for services provided.
- (c) Allied beneficiaries who receive emergency inpatient care from a non-VA facility without prior VA authorization must send any billing directly to their appropriate veteran's agency. VA cannot pay or bill for such care on behalf of the beneficiary.
- (2) **Non-Emergent Inpatient Treatment for Allied Beneficiaries.** An allied beneficiary found to be in need of non-emergent inpatient treatment may <u>not</u> be treated <u>until</u> the allied government provides authorization for such services.
- e. <u>Dental Treatment for Allied Beneficiaries</u>. Dental treatment is furnished to eligible allied beneficiaries either on an outpatient or inpatient basis at a VA health care facility or on a fee basis as determined by the Chief, Dental Services, or designee.

(1) Emergency Dental Treatment

- (a) Emergency dental treatment can be provided to allied beneficiaries, even though the facility may <u>not</u> have authorization at the time services are provided.
- (b) If it is later determined that the allied beneficiary was <u>not</u> authorized for the dental treatment on an emergency basis, no further treatment may be provided except when the care is authorized. The allied beneficiary is to be billed at the humanitarian emergency rate for services provided. *NOTE:* For more information on providing humanitarian services, see *VHA.HB.1601D.04* (to be published).
- (2) **Non-Emergent Dental Treatment.** An allied beneficiary found to be in need of non-emergent dental treatment may <u>not</u> be treated <u>until</u> the allied government provides authorization for such services.
- f. <u>Prosthetic Appliances</u>, <u>Sensory Aids</u>, <u>Cosmetic Restorations</u>, <u>Artificial Eyes</u>, <u>and/or Medical Accessories for Allied Beneficiaries</u>. Prosthetic appliances, sensory aids, cosmetic restorations, artificial eyes, and/or medical accessories may be furnished to, and/or replaced or repaired for, allied beneficiaries when determined medically necessary and approved by the appropriate government.

g. Transportation of Allied Beneficiaries

- (1) **Transportation with Authorization.** Authorized transportation, including ambulance transportation, may be provided to allied beneficiaries subject to reimbursement by the governments concerned, and in accordance with VA beneficiary travel policy.
- (2) **Transportation without Authorization.** Allied beneficiaries applying in-person for examination, treatment, or hospitalization without authorization for services may be reimbursed

the cost of transportation if, in the opinion of the authorizing VA official, the beneficiary was justified in reporting for the examination, treatment, or hospitalization in relation to the disability for which medical care was authorized and subsequently approved by the appropriate government.

- 6. ELIGIBILITY AND PROVISION OF SERVICES FOR MEMBERS OF THE ARMED FORCES OF THE GOVERNMENT OF CZECHOSLOVAKIA AND POLISH BENEFICIARIES
- a. <u>Provision of Services for the Members of the Armed Forces of the Government of Czechoslovakia and Polish Beneficiaries.</u> VA provides hospital, domiciliary, and medical services, including transportation, to a member of any armed force of the Government of Czechoslovakia, or Poland in the same manner as U.S. veterans, subject to certain eligibility requirements. Eligible beneficiaries are to be:
 - (1) Registered in VistA,
 - (2) Enrolled in the VA health care system,
 - (3) Placed in the appropriate Enrollment Priority Group,
 - (4) Issued a VIC, and
 - (5) Subject to appropriate co-payments.

NOTE: See subparagraph 5b, if the beneficiary is receiving a war pension from the British Veterans Agency.

- b. <u>Eligibility Requirements for the Members of the Armed Forces of the Government</u> of Czechoslovakia and Polish Beneficiaries. Members of the Armed Forces of the Government of Czechoslovakia and Polish beneficiaries must provide proof of the following eligibility requirements in order to receive VA health care benefits:
 - (1) U.S. citizenship for at least 10 years, and
- (2) Authenticated certification from the French Ministry of Defense, or the British War Office, as to records in either such office which clearly indicate military service of the applicant in the armed forces of the governments of Czechoslovakia and Poland, and subsequent service in, or with, the armed forces of Great Britain or France, during the period of World War I or World War II

NOTE: For more information on providing proof of eligibility, see <u>VHA.PG.1601D.02.2.4</u> (for internal VHA use only).

7. ELIGIBILITY AND PROVISION OF SERVICES FOR FOREIGN NATIONAL BENEFICIARIES.

- a. <u>Provision of Services for Foreign National Beneficiaries.</u> VA provides services on an advance-of-funds or reimbursement basis to friendly countries whenever the President determines it to be consistent with national policy.
- b. <u>Eligibility Requirements for Foreign National Beneficiaries</u>. The responsibility for making eligibility determinations for foreign national beneficiaries has been delegated by the President to the Administrator of the Agency for International Development (AID). *Title 22 U.S.C. § 2357(a) authorizes any agency of the United States government to furnish services or commodities to friendly countries on an advance-of-funds or reimbursement basis when approved by AID.*

8. DEATH BENEFITS OF ALLIED AND FOREIGN NATIONAL BENEFICIARIES.

- a. <u>Allied and Foreign National Beneficiaries</u>. Allied and Foreign National Beneficiaries are only eligible for death benefits that are authorized by the appropriate foreign government.
- b. Former Members of the Armed Forces of the Government of Czechoslovakia and Polish Beneficiaries. These beneficiaries:
 - (1) Are not eligible for VA death benefits, and
 - (2) Must have their own arrangements.

9. BILLING AND COLLECTIONS FOR ALLIED AND FOREIGN NATIONAL BENEFICIARIES.

For information on billing and collection processes please refer to <u>VHA.PG.1601D.02.4</u> (for internal VHA use only.